PTO/SB/05 (08-03)

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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonnmyisional applications under 37 CER 1 53(b))

Attorney Docket No.	18003-D2					
First Inventor	John C. Bell					
Title	ONCOLYTIC VIRUS					
Eypress Mail Lahel No	ET089482099US					

(Only for new t	Tionprovisional applications under 57 CFT(1.05(b))	Express Mail Label No. 12100340	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	PPLICATION ELEMENTS ter 600 concerning utility patent application contents.	ADDRESS TO: Commiss P.O. Box	Patent Application ioner for Patents 1450 ia VA 22313-1450
2. Applicant of Applicant of See 37 CF 3. Specificatis (preferred a - Descriptive - Cross Refi - Statement - Reference or a compi - Backgrour - Brief Sumi - Brief Desc - Detailed D	on [Total Pages 59] rrangement set forth below) e title of the invention erence to Related Applications Regarding Fed sponsored R & D e to sequence listing, a table, uter program listing appendix and of the Invention mary of the Invention cription of the Drawings (if filed)	ii. 🔽 Paper	endix) Sequence Submission Form (CRF) ence Listing on: CD-R (2 copies); or g identity of above copies
- Claim(s)	f the Dicelegure	ACCOMPANYING AI	PPLICATION PARTS
- Abstract of 4.	come a prior application (37 CFR 1.63(d)) intinuation/divisional with Box 18 completed) LETION OF INVENTOR(S) ed statement attached deleting inventor(s) e in the prior application, see 37 CFR (d)(2) and 1.33(b). Con Data Sheet. See 37 CFR 1.76 ING APPLICATION, check appropriate box, and suping the title, or in an Application Data Sheet under 3 Divisional Continuation	10. 37 CFR 3.73(b) Statem (when there is an assignation of the content of the con	Attorney (Associate) cument (if applicable) Copies of IDS Citations t d (MPEP 503) itemized) y Document(s) med) t under 35 U.S.C. 122 ust attach form PTO/SB/35 ate of Mailing
	19. CORRESPON	DENCE ADDRESS	
Customer N	Number: 31976	OR Corre	espondence address below
Name			
Address			
City		State	Zip Code
Country		elephone	Fax
Name (Print/Type)	Lewis J. Kreisler	Registration No. (Attorney/Agent)	38522
Signature	1 Comp of the last	. region about the (rice mey/Agent)	
	Leusley		Date 12/22/03

This collection of information is redufred by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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CEE TOANGMITTAL			Complete if Known				
FEE TRANSMITTAL			Application Number Not Assigned				
for FY 2004 Effective 10/01/2003. Patent fees are subject to annual revision.			Filing Date		December 22, 2003	December 22, 2003	
			First Named Inventor		ntor John C. Bell		
· · · · · · · · · · · · · · · · · · ·	\dashv	Exam	iner Na	ame	Robert A. Zeman		
Applicant claims small entity status. See 37 CFR 1.27		Art U	Art Unit 1645		1645		
TOTAL AMOUNT OF PAYMENT (\$) 770.00		Attorney Docket No. 18003-D2					
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
Check Credit card Money Other None	3. ADDITIONAL FEES						
Deposit Account:	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Pescription						
Deposit Account 50-1677		Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Number	1051	130	2051		Surcharge - late filing fee or oath		
Pro-Neuron, Inc.	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		
Name The Director is authorized to: (check all that apply)		130	1053		Non-English specification		
Charge fee(s) indicated below Credit any overpayments		2,520		•	For filing a request for ex parte reexamination		
Charge any additional fee(s) or any underpayment of fee(s)		920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month		
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month		
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month		
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255	1,005	Extension for reply within fifth month	·····	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402	330	2402		Filing a brief in support of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403		Request for oral hearing		
1005 160 2005 80 Provisional filing fee		1,510	1451		Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 770.00	1452	110	2452		Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2453		Petition to revive - unintentional		
Fee from Extra Claims below Fee Paid	1501	1,330 480	2501 2502		Utility issue fee (or reissue) Design issue fee		
Total Claims 19 -20** = X = X		640	2502		Plant issue fee		
		130	1460		Petitions to the Commissioner		
Multiple Dependent	1460 1807	50	1807		Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity	1806	180	1806		Submission of Information Disclosure Stmt		
Fee Fee Fee Fee Description Code (\$) Code (\$)	8021	40	8021		Recording each patent assignment per property (times number of properties)		
1202 18 2202 9 Claims in excess of 20	1809	770	2809		Filing a submission after final rejection		
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2040	205	(37 ČFR 1.129(a))		
1204 86 2204 43 ** Reissue independent claims		770	2810	300	For each additional invention to be examined (37 CFR 1.129(b))	I	
over original patent		770	2801		Request for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	i	
			ecify)				
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic F	iling Fe	ee Paid SUBTOTAL (3) (\$) 0		
SUBMITTED BY (Complete (if applicable))							

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(Attorney/Agent)

38522

Telephone 240-631-2500

/o

Date

Name (Print/Type)

Signature

Lewis Kreisler

CERTIFICATE OF MAILING BY EXPRESS MAIL (37 CFR 1.10)

I hereby certify that the correspondence to which this certificate is affixed, including each document referred to therein as being enclosed or submitted therewith, is being deposited with the "Express Mail Post Office to Addressee" service of the United States Postal Service on the date indicated below and is addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Express Mail Mailing Label No. ET089482099US

Date of Deposit: December 22, 2003

Print Name: Stacey Williams

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s):

John C. Bell, et al.

Atty. Ref.:

18003-D2

Appl. No.:

Not Yet Assigned

Group Art Unit:

1645

Filed:

Herewith

Examiner:

Robert A. Zeman

For:

ONCOLYTIC VIRUS

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

TRANSMITTAL LETTER

Applicants submit herewith:

Utility Patent Application Transmittal including Application parts identified therein

Fee Transmittal Form

Submission of Sequence Listing

Copy of Executed Declaration from parent application

Copy of Appointment of Associate Attorney from parent application

Respectfully submitted,

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